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14230 U.S. PTO

BOWDITCH & DEWEY, LLP

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| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))</i> | | Attorney Docket No. | | 301505.3005-100 | |
| | | First Named Inventor or Application Identifier | | Peter So | |
| | | Express Mail Label No. | | ER 094113777 US | |
| Title of Invention | | Systems and Methods for Volumetric Tissue Scanning Microscopy | | | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | | ADDRESS TO: Mail Stop PATENT APPLICATION Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | | |
| 1. <input type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Specification [Total Pages 55] <input type="checkbox"/> <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to microfiche Appendix - Background of the Invention - Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 14] <input type="checkbox"/> <input type="checkbox"/> Formal <input checked="" type="checkbox"/> Informal <input checked="" type="checkbox"/> Fig. of the Drawings for Publication [1A] 4. <input type="checkbox"/> Oath or Declaration/POA [Total Pages <input type="checkbox"/>] <input type="checkbox"/> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i> [NOTE Box 5 below] i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting Inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference <i>(usable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. | | | 6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i> 7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) <input type="checkbox"/> Pages c. <input type="checkbox"/> Statement verifying identity of above copies | | |
| | | | ACCOMPANYING APPLICATION PARTS 8. <input type="checkbox"/> Assignment Papers (cover sheet & documents) <input checked="" type="checkbox"/> Assignee - Massachusetts Institute of Technology 77 Massachusetts Avenue Cambridge, MA 02139 9. <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication Request <i>(check parent application)</i> 17. <input type="checkbox"/> Other: _____ | | |
| 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner: Group Art Unit: | | | | | |
| 19. CORRESPONDENCE ADDRESS | | | | | |
| NAME | | THOMAS O. HOOVER, ESQ. | | | |
| | | BOWDITCH & DEWEY, LLP | | | |
| ADDRESS | | 161 Worcester Road, P.O. Box 9320 | | | |
| CITY | Framingham | STATE | MA | ZIP CODE | 01701-9320 |
| COUNTRY | USA | TELEPHONE | (508) 879-5700 | FAX | (508) 929-3073 |
| Signature | | Monica Grewal | | Date | August 15, 2003 |
| Submitted by Typed or Printed Name | | Monica Grewal | | Reg. Number | 40,056 |

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